

Village of Cambridge
56 North Park Street
Cambridge, NY 12816
518-677-2622
newdepclerk@cambridgeny.gov

The Village of Cambridge has birth records for those born at Mary McClellan Hospital or within the village limits (either at home or other facilities) for the period December 30, 1881 to the present.

The request for a **certified copy** or **certified transcript** of birth may be accepted from a qualified applicant if the following conditions are satisfied:

1. The applicant completes and signs the application form provided by the Department of Health (DOH-296A);
2. The applicant presents his/her driver's license;
3. The applicant is eligible to receive the copy (see below); and
4. The applicant provides a \$10.00 fee by check or money order, made payable to the Village of Cambridge, or cash if paid in person.

A certified copy or certified transcript of birth, from the State of New York Department of Health, may be issued only:

1. To a person with a New York State Court Order;
2. To the person named on the birth certificate, if 18 years of age or older;
3. To the parents of the person named on the birth certificate;
4. To the lawful representative of the person named or the parents of the person named on the birth certificate;
5. To the Commissioner of Health; or
6. To a municipal, state or federal agency when needed for official purposes.

Application, money and copy of driver's license to process send to:

Village of Cambridge
56 North Park Street
Cambridge, NY 12816
(518)677-2622

Application to Local Registrar for Copy of Birth Record

CERTIFICATE INFORMATION

First Middle Last Name			Date of Birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> M M D D Y Y Y Y		
Place of Birth <small>Hospital (If not hospital, give street & number)</small> Mary McClellan Hospital			(Village, Town or City) Cambridge		County Washington
First Middle Last Father			Maiden Name First Middle Last of Mother		
Number of Copies Requested		Enter Birth No. if Known		Enter Local Registration No. if Known	

Purpose for Which Record is Required (Check One)

<input type="checkbox"/> Passport	<input type="checkbox"/> Working Papers	<input type="checkbox"/> Welfare Assistance
<input type="checkbox"/> Social Security-Retirement	<input type="checkbox"/> School Entrance	<input type="checkbox"/> Veteran's Benefits
<input type="checkbox"/> Social Security-SSI	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Court Proceeding
<input type="checkbox"/> Retirement	<input type="checkbox"/> Marriage License	<input type="checkbox"/> Entrance into Armed Forces
<input type="checkbox"/> Employment		
<input type="checkbox"/> Other (Specify) _____		

APPLICANT INFORMATION

NAME FIRST MIDDLE LAST		If attorney, give name and relationship of your client to person whose record is required	
What is your relationship to person whose record is required? <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Other, specify _____		<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	
Telephone No. (<input type="text"/> <input type="text"/> <input type="text"/>) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		(name of client) (relationship)	
Social Security No. <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Signature of Applicant		Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM DD YY	
Address of Applicant Street City State Zip Code		<h3>FOR REGISTRAR'S USE ONLY</h3> <small>(Photocopy ID and attach to application form)</small> TYPE OF ID <input type="checkbox"/> Driver's License State _____ No. _____ <input type="checkbox"/> Other ID, specify _____ No. _____	

TYPES OF ACCEPTABLE IDENTIFICATION

1. Driver's license
2. Non-driver's license
3. Passport
4. Naturalization Papers
5. Military ID
6. Employer's Photo ID
7. Two utility bills, showing applicant's name and address
8. Police report of lost or stolen ID

DO NOT ISSUE COPY UNLESS ONE OF THE ABOVE TYPES OF IDENTIFICATION IS PRESENTED